

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

DISCLOSURE SUMMARY PAGE

COMMITTEE NAME (Must be same as on Statement of Organization)

Uehling for MayorIMPORTANT: Indicate type of committee you are reporting for: 4(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate
(5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee
(8) Support State of Candidates**CANDIDATE COMMITTEES ONLY:**

Candidate Name

DALE UEHLING

Political Party

D

Office Sought

Mayor

District (If Senate or House)

FORM

DR-2

(Rev. 07/2003)

DISCLOSURE
REPORT**For Office Use Only**

Comm. # _____

Logged In _____

Scanned _____

Computer _____

Audited _____

Terry L McN...
SIGNATURE OF TREASURER (or person filing this report)(641) 683-4431
TELEPHONE10-29-03
DATE SIGNED

Late filed reports are subject to possible civil and criminal penalties.

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:I AM FILING A 10-30-03 REPORT FOR AN/A 1 ELECTION (2) NON-ELECTION YEAR.
(report date)Indicate one 1☐ CHECK IF AMENDMENT TO REPORT DATED _____☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a Notice of Dissolution is filed.)

Local Committees, enter Date of Election

11-04-03County & Local Committees, enter County in
which Election is heldWapello**STATEMENT OF CASH ON HAND**CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held
by the committee. This amount **MUST** be the same as the cash on hand at the end
of the last reporting period, or must be zero if this is first report filed.)\$ 1230.00**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

3219.00

Schedule F: Loans Received total (Attach Schedule F)

0

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL \$

4449.00**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

2480.78

Schedule F: Loan Repayments total (Attach Schedule F)

0CASH ON HAND at the end of this reporting period (if final report, balance must
be zero) (Attach DR-3)\$ 1968.22

**UNPAID BILLS (From Schedule D - Attach Schedule D)

\$ 187.03

*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$ 374.52

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

\$ 0**CANDIDATE COMMITTEES ONLY:**

CONSULTANT BREAKDOWN (Schedule G Attached?)

☐ YES ☒ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ 0

CONTRIBUTIONS - MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

MONETARY
RECEIPTS☐ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Uehling for Mayor

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 88B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
10-04-03	ID# CK# 4697	Jon Wiegard 602 Winchester Rd. Ottumwa, IA. 52501		\$ 50.00	<input type="checkbox"/>
10-06-03	ID# CK# 2128	John Helgeson 11374 - 140th St. Ottumwa, IA. 52501		100.00	<input type="checkbox"/>
10-06-03	ID# CK# 1026	Michael Moreland 129 West 4th St. Ottumwa, IA. 52501		50.00	<input type="checkbox"/>
10-06-03	ID# CK# 6103	Dorlene Crist 220 CARTER AVE. Ottumwa, IA. 52501		50.00	<input type="checkbox"/>
10-13-03	ID# CK# 1461	DAVID B. Allison 208 E. PARK AVE. Ottumwa, IA. 52501		250.00	<input type="checkbox"/>
10-13-03	ID# CK# 4135	KATHLEEN UENLING 2701 MADISON AVE. DES MOINES IOWA 50310	DAUGHTER	50.00	<input type="checkbox"/>
10-13-03	ID# CK# 2090	JAMES SCHWARTZ 107 E. 2nd St. Ottumwa,		100.00	<input type="checkbox"/>
10-13-03	ID# CK# 9314	Sarah Sels 133 E. Court St. Ottumwa, IA. 52501		50.00	<input type="checkbox"/>
10-13-03	ID# CK# 1776	Lorraine Uehling Techel 6688 80th Ave. Agency, IA. 52530	Daughter	100.00	<input type="checkbox"/>
10-16-03	ID# CK# 5166	WALTER ZLOGAR 1607 N. ELM ST. Ottumwa, IA. 52501		50.00	<input type="checkbox"/>

SUB-TOTAL

\$ 850.00

TOTAL (If last page of this schedule)

\$ 850.00

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 5
(for Schedule A)

No. 4384	P. 4
SCHEDULE A (Rev. 07/03)	MONETARY RECEIPTS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

CONTRIBUTIONS -- MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Uehling for Mayor

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), Iowa Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (if applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
10-22-03	ID# CK# 11190	TOM LAZIO 2301 N. Court St. Ottumwa, IA. 52501		\$ 50.00	<input type="checkbox"/>
10-22-03	ID# CK# 2347	Mary Lazio 2301 N. COURT ST. OTTUMWA, IA. 52501		50.00	<input type="checkbox"/>
10-22-03	ID# CK# 1304	Martin Helgeson 216 S. MARKET ST. Ottumwa, IA. 52501		150.00	<input type="checkbox"/>
10-20-03	ID# CK# /	Unitemized Contributions		145.00	<input checked="" type="checkbox"/>
10-02-03	ID# CK# /	Unitemized Contribution		25.00	<input type="checkbox"/>
10-24-03	ID# CK# /	Unitemized Contributions		25.00	<input type="checkbox"/>
10-24-03	ID# CK# 3892	Robert Helgeson 12205 Angle Rd. Ottumwa, IA. 52501		100.00	<input type="checkbox"/>
10-24-03	ID# CK# 13541	Ruth Seim 141 E. Court St. Ottumwa, IA. 52501		100.00	<input type="checkbox"/>
10-24-03	ID# CK# /	Unitemized Contributions		25.00	<input type="checkbox"/>
10-27-03	ID# CK# 5289	MAX VON SCHROEDER JR. 405 E. GOLF ST. Ottumwa, IA. 52501		100.00	<input type="checkbox"/>
SUB-TOTAL				\$ 770	550 220
TOTAL (if last page of this schedule)				\$ 1620.00	

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Page 2 of 5
(for Schedule A)

CONTRIBUTIONS - MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

MONETARY
RECEIPTSCHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Vehling for Mayor

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
10-18-03	ID# CK# 1027	Mike Moreland 129 W. 4th St. Ottumwa, IA. 52501		\$ 100. ⁰⁰	<input type="checkbox"/>
10-19-03	ID# CK# 5810	William E. Linstrom 242 W. Manning St. Ottumwa, IA. 52501		50. ⁰⁰	<input type="checkbox"/>
10-19-03	ID# CK#	Unitemized Deductions		75. ⁰⁰	<input type="checkbox"/>
10-19-03	ID# CK# 2752	Rosalie McFarland 9 Schwartz Dr. Ottumwa, IA. 52501		30. ⁰⁰	<input type="checkbox"/>
10-21-03	ID# CK#	Unitemized Deductions		58. ⁰⁰	<input type="checkbox"/>
10-22-03	ID# CK#	Unitemized Deductions		42. ⁰⁰	<input type="checkbox"/>
10-25-03	ID# CK# 11026	Ellen Vaughn 238 W. GOLF ST. Ottumwa, IA. 52501		50. ⁰⁰	<input type="checkbox"/>
10-26-03	ID# CK# 10574	Gregory Hart 49 Brookwood Ct. Ottumwa, IA. 52501		100. ⁰⁰	<input type="checkbox"/>
10-26-03	ID# CK# 2237	Kathy Hartoy 464 E. Rochester Rd. Ottumwa, IA. 52501		75. ⁰⁰	<input type="checkbox"/>
10-26-03	ID# CK#	Unitemized Deductions		118. ⁰⁰	<input type="checkbox"/>

SUB-TOTAL

\$ 698.⁰⁰

TOTAL (If last page of this schedule)

\$ 2318.⁰⁰

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Page 3 of 5
(for Schedule A)

CONTRIBUTIONS - MONEY TAKEN IN

(Including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization)

Uehling for Mayor

SCHEDULE**A**

(Rev. 07/03)

**MONETARY
RECEIPTS**CHECK THIS BOX IF
AMENDING FORM

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	IF FOR FUND- RAISER INCOME
10-27-03	ID# CK# 5596	Marsha Parker 9824 BLADENSBURG RD. OTTUMWA, IA. 52501		\$ 50. ⁰⁰	<input type="checkbox"/>
10-27-03	ID# CK# 1081	Thomas Awtry 9 Birchwood St. OTTUMWA, IA. 52501		100. ⁰⁰	<input type="checkbox"/>
10-27-03	ID# CK# 7286	JUDY BLOMMER 14 Greenbriar OTTUMWA IA. 52501		100. ⁰⁰	<input type="checkbox"/>
10-27-03	ID# CK# 1893	DR. PAUL W. SCOTT 517 E. ALTA VISTA OTTUMWA, IA. 52501		50. ⁰⁰	<input type="checkbox"/>
10-27-03	ID# CK# 9545	G. M. Miller 11262 Angle Rd. OTTUMWA, IA. 52501		100. ⁰⁰	<input type="checkbox"/>
10-28-03	ID# CK# 7093	Dr. R. C. Roush 11582 DAHLONEGA RD. OTTUMWA, IA. 52501		50. ⁰⁰	<input type="checkbox"/>
10-28-03	ID# CK#	Unitemized Deduction		50. ⁰⁰	<input type="checkbox"/>
10-28-03	ID# CK#	Unitemized Deductions		270. ⁰⁰	<input type="checkbox"/>
10-28-03	ID# CK#	Ronald D. Crist 220 CARTER AVE. OTTUMWA, IA. 52501		50. ⁰⁰	<input type="checkbox"/>
10-28-03	ID# CK#	Unitemized Deduction		19. ⁰⁰	<input type="checkbox"/>

SUB-TOTAL

\$ 839.⁰⁰

TOTAL (If last page of this schedule)

\$ 3157.⁰⁰

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Page 4 of 5
(for Schedule A)

CONTRIBUTIONS – MONEY TAKEN IN

(Including candidate's personal funds)

SCHEDULE

A

(Rev. 07/03)

MONETARY
RECEIPTS☐ CHECK THIS BOX IF
AMENDING FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Uehling for Mayor

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN DISCLOSURE BOARD.

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DATE RECEIVED (MM/DD/YY)	PAC ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	✓ IF FOR FUND- RAISER INCOME
10-29-03	ID# CK#	Unitemized Contribution		\$ 62. ⁰⁰	<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>
	ID# CK#				<input type="checkbox"/>

SUB-TOTAL

\$ 62.⁰⁰

TOTAL (If last page of this schedule)

-

* Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 5 of 5
(for Schedule A)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES – MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Uehling for Mayor

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (if applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10-03	ID# CK# 002	KLEE Radio 601 W. 2nd St. Othumwa, IA. 52501	Advertising	\$ 200. ⁰⁰
10-03	ID# CK# 003	KBIZ Radio 209 S. Market St. Othumwa, IA. 52501	Advertising	200. ⁰⁰
10-04-03	ID# CK# 004	Othumwa Courier 213 E. 2nd St. Othumwa, IA. 52501	Advertising	325.95
10-18-03	ID# CK# 005	K15.5 RADIO 416 E. MAIN ST. Othumwa, IA. 52501	Advertising	54. ⁰⁰
10-18-03	ID# CK# 006	KBIZ Radio 209 S. Market St. Othumwa, IA. 52501	Advertising	30. ⁰⁰
10-18-03	ID# CK# 007	KLEE RADIO 601 W. 2nd St. Othumwa, IA. 52501	Advertising	40. ⁰⁰
10-27-03	ID# CK# 008	Othumwa Printing 105 S. Birch St. Othumwa, IA. 52501	Signs + Hardware Uehling for Mayor	652.70
10-27-03	ID# CK# 009	The Photo Shop P.O. Box 851 Othumwa, IA. 52501	Buttons + T-Shirts	124.83
SUB-TOTAL				\$ 1627.48
TOTAL (If last page of this schedule)				\$ 1627.48

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and Iowa Code 68A.6(3)(f).)

Page 1 of 2

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

SCHEDULE B (Rev. 07/03)	MONETARY EXPENDITURES
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

COMMITTEE NAME (Must be same as on Statement of Organization)

Uehling for Mayor

DATE EXPENDED (MM/DD/YR)	CANDIDATE ID NUMBER (If applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS TO WHOM EXPENDITURE (Disbursement) WAS MADE	PURPOSE (DESCRIBE TRANSACTION)	AMOUNT EXPENDED
10-27	ID# CK# 10	North HyVee 2800 N. Court St. Ottumwa, IA. 52501	Parade Candy	\$ 35.00
10-27	ID# CK# 11	KYOUTV/FOX 820 W. 2nd St. Ottumwa, IA. 52501	Advertising	500.00
10-27	ID# CK#	Wells Fargo Bank 231 W. 2nd St. Ottumwa IA. 52501	Account Fee Deducted Automatically	5.30
10-28	ID# CK# 12	OW MEDIA (MEDIKOM) GATEWAY DR. OTTUMWA, IA. 52501	Advertising	313.00
	ID# CK#			
	ID# CK#			
	ID# CK#			
	ID# CK#			
SUB-TOTAL				\$ 853.30
TOTAL (If last page of this schedule)				\$ 2480.78

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

Purchases of certain campaign property costing \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H Instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G Instructions and Iowa Code 68A.6(3)(I).)

Page 2 of 2

(for Schedule B)

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Uehling for Mayor

NOTE: Debts previously reported that remain unpaid must be included on this Schedule, as well as any new obligations incurred in this period.

Reset Form

SCHEDULE D (Rev. 08/98)	INCURRED INDEBTEDNESS
<input type="checkbox"/> CHECK THIS BOX IF AMENDING FORM	

**DEBTS/OBLIGATIONS REMAINING THIS REPORTING PERIOD
(DO NOT INCLUDE LOANS -- SHOW LOANS ON SCHEDULE F)**

An "incurred debt" is a debt for goods or services ordered or received, but not paid for by the end of the reporting period., regardless of whether an invoice has been received.

DATE INCURRED (MM/DD/YR)	NAME AND ADDRESS OF PERSON TO WHOM DEBT OR OBLIGATION IS OWED	DESCRIPTION OF GOODS OR SERVICES PROVIDED OR PURCHASED	BALANCE OWED AT CLOSE OF REPORTING PERIOD*
10-25-03	OHumwa Printing 105 S. Birch St. OHumwa, Ia. 52501	Printing Services	\$ 133.00 Estimated
10-19-03	Hy Vee 2800 N. Court St. OHumwa, Ia. 52501	Refreshments	54.03
SUB-TOTAL			\$ 187.03
TOTAL DEBTS OWED BY COMMITTEE AT THE END OF THIS REPORTING PERIOD			\$ 187.03

*If actual figure is unknown, show "estimated" beside the figure.

Page 1 of 1
(for Schedule D)**CANDIDATE COMMITTEES NOTE:**

"Incurred indebtedness also includes each person/entity with whom the candidate's committee has entered into a contract during the reporting period for future or continuing performance. Enter the name of the consultant who provides or procures services for items such as advertising, fund-raising, polling, managing, or organizing services. Report on Schedule G the nature of performance and the estimated performance reasonably expected of the consultant.

FOR INSTRUCTIONS, SEE BACK OF FORM

COMMITTEE NAME (Must be same as on Statement of Organization)

Vehling for Mayor

Reset Form

SCHEDULE E (Rev. 06/97)	IN KIND CONTRIBUTIONS
--------------------------------------	--------------------------

☐ CHECK THIS BOX IF
AMENDING FORM

DATE RECEIVED (MM/DD/YY)	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE * (If applicable)	DESCRIPTION OF IN KIND CONTRIBUTION	ESTIMATED FAIR MARKET VALUE	✓ IF FOR FUND-RAISER CONTRIBUTION
10-21-03	The Photo Shop 800 Gateway Dr. Oklahoma IA. 52501		Promotional Buttons + BANNERS	\$ 374.52	<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>
					<input type="checkbox"/>

SUB-TOTAL \$ 374.52

TOTAL (if last
page of this
schedule) \$ 374.52

*Disclosure law requires candidates to disclose the relationship of any relative making an in kind contribution to the committee. Relationship must be shown to the third degree of consanguinity (blood relatives) and affinity (relatives by marriage). (See Page 2 of forms packet.) If surname of contributor is the same as candidate, but there is no familial relationship, enter "not applicable" in the relationship column.

Page 1 of 1
(for Schedule E)

FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

DISCLOSURE SUMMARY PAGE

COMMITTEE NAME (Must be same as on Statement of Organization) <u>Uehling for Mayor</u>	
IMPORTANT: Indicate type of committee you are reporting for: <u>4</u>	
(1) Statewide/Legislative Candidate (2) Statewide PAC (3) State Party (4) County/Local Candidate (5) County PAC (6) Ballot Issue/Franchise Committee (7) County/City Central Committee (8) Support State of Candidates	
CANDIDATE COMMITTEES ONLY:	
Candidate Name <u>DALE UEHLING</u>	Political Party <u>D</u>
Office Sought <u>MAYOR</u>	District (If Senate or House)

FORM DR-2 (Rev. 07/2003)	DISCLOSURE REPORT
For Office Use Only	
Comm. #	
Logged In	
Scanned	
Computer	
Audited	

NOV 24 2003

Terry L McN
SIGNATURE OF TREASURER (or person filing this report)

(641) 683-4431
TELEPHONE

10-29-03
DATE SIGNED

Late filed reports are subject to possible civil and criminal penalties.

SEE INSTRUCTIONS ON BACK AND COMPLETE THE FOLLOWING SENTENCE:

I AM FILING A 10-30-03 REPORT FOR ANA 1 ELECTION 1 (2) NON-ELECTION YEAR.
(report date)

Indicate one 1

☒ CHECK IF AMENDMENT TO REPORT DATED 10-30-03

☐ Check if this is final (termination) report and attach Notice of Dissolution Form DR-3.
(You must continue to file reports until a Notice of Dissolution is filed.)

Local Committees, enter Date of Election <u>11-04-03</u>
County & Local Committees, enter County in which Election is held <u>Wape110</u>

STATEMENT OF CASH ON HAND

CASH ON HAND at the beginning of the reporting period. (This is the total of all monies held by the committee. This amount **MUST** be the same as the cash on hand at the end of the last reporting period, or must be zero if this is first report filed.)

\$ 1230.00**ADD TOTAL MONEY TAKEN IN THIS PERIOD**

Schedule A: Cash Contributions total (Attach Schedule A) (*also see in-kind below)

\$ 3219.00

Schedule F: Loans Received total (Attach Schedule F)

0

Schedule H: Total Sales of Campaign Property (Attach Schedule H)

0

(Schedule H applies to Candidates' Committees Only)

SUB-TOTAL

\$ 3219.00 CORRECTED**SUBTRACT TOTAL MONEY SPENT THIS PERIOD**

Schedule B: Expenditures total (Attach Schedule B) (**also see debts and loans below)

\$ 2480.78

Schedule F: Loan Repayments total (Attach Schedule F)

0

CASH ON HAND at the end of this reporting period (if final report, balance must be zero) (Attach DR-3)

\$ 1968.22

**UNPAID BILLS (From Schedule D - Attach Schedule D)

\$ 187.03

*IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule E)

\$ 374.52

**OUTSTANDING LOANS (From Schedule F - Attach Schedule F)

\$ 0**CANDIDATE COMMITTEES ONLY:**

CONSULTANT BREAKDOWN (Schedule G Attached?)

☐ YES ☒ NO

VALUE OF CAMPAIGN PROPERTY (From Schedule H - Attach Schedule H)

\$ 0